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TDANOMITTAL FORM		Application No.	09/134,272		
TRANSMITTAL FORM		Filing Date	August 14, 1998	····	
(to be used for all correspondence after initial filing)		First Named Inventor	Zifei Peter Wang		
		Group Art Unit	2641	COPY OF P	PAPER
		Examiner Name	Angela A. Armstron	ORIGINALLY	YFILE
Total Number of Pages in This Submission 16	3	Attorney Docket Number	3239P010		

ENCLOSURES (check all that apply)								
Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group						
Fee Attached	Drawing(s)	Appeal Communication to Board of Appeals and Interferences						
Amendment / Response	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief						
After Final Affidavits/declaration(s)	Petition	Proprietary Information						
Extension of Time Request	Petition to Convert a Provisional Application	Status Letter						
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Response to Missing Parts/ Incomplete Application	CD, Number of CD(s)							
Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks							
SIGNATUR	E OF APPLICANT, ATTORNEY, OR AG	ENT						
Firm William W. Sch	naal, Reg. No. 39,018							
Individual name BLAKELY, 8	OKOLOFF, TAYLOR & ZAFMA	AN LLP						
Signature	2/1							
Date June 28, 2002	<i>)</i> '							
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FEE TRANSMITTAL		Complete if Known				
FEE I KANSIVII I AL			Application Number	09/134,272	COn	
for FY 2002		Filing Date	August 14, 1998	COPY OF P	APEN	
Patent fees are subject to annual revision.			First Named Inventor	Zifei Peter Wang	MALLY	FILEL
Applicant claims small entity status. See 37 CFR 1.27.		Examiner Name	Angela A. Armstron		.cel	
			Group/Art Unit	2641		
TOTAL AMOUNT OF PAYMENT	(\$) 110.00		Attorney Docket No.	3239P010		

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METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)								
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Name Blakery, Sokolon, Taylor & Zannan EEr	139	130	139	130	Non-English specific	ation	9	JUL 1	m
The Commissioner is authorized to: (check all that apply)	147	2,520	147	2,520	For filing a request for	or <i>ex parte</i> reexamin	nation	حسنا	7
Charge fee(s) indicated below Credit any overpayments	112	920 *	112	920 *	Requesting publication	on of SIR prior to	ä	2(Æ
Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	113	1,840*	112	10/	Basication sublicati	on of SID offer	9	2002	
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to the above-identified deposit account	115	110	215	55	Surcharge - late filing Surcharge - late pro- cover sheet. Non-English specific For filing a request for Requesting publicati Examiner action Requesting publicati Examiner action	ithin first month	8		110.00
FEE CALCULATION	116	400	216	200	Extension for reply w	ithin second month			
1. BASIC FILING FEE	117	920	217	460	Extension for reply w	ithin third month			
Large Entity Small Entity	118	1,440	218	720	Extension for reply w	ithin fourth month			
Fee Fee Fee Fee Fee Description Fee Paid	128	1,960	228	980	Extension for reply wi	ithin fifth month			
Code (\$) Code (\$)	119	320	219	160	Notice of Appeal				<u> </u>
101 740 201 370 Utility filing fee	120	320	220	160		art of an annual			
106 330 206 165 Design filing fee					Filing a brief in suppo				L
107 510 207 255 Plant filing fee	121	280	221	140	Request for oral hear	·			
108 740 208 370 Reissue filing fee	138	1,510		1,510	Petition to institute a		ing		
114 160 214 80 Provisional filing fee	140	110	240	55	Petition to revive - ur	navoidable			
SUBTOTAL (1) (\$)	141	1,280	241	640	Petition to revive - un	nintentional			
	142	1,280	242	640	Utility issue fee (or re	eissue)			
2. EXTRA CLAIM FEES Extra Fee from	143	460	243	230	Design issue fee				
Claims below Fee Paid	144	620	244	310	Plant issue fee				
Total Claims 18	122	130	122	130	Petitions to the Comm	missioner			
Independent 3 x = X	123	50	123	50	Processing fee under	37 CFR 1.17(q)		l	
Multiple Dependent =	126	180	126	180	Submission of Inform	ation Disclosure St	mt		
Large Entity Small Entity	581	40	581	40	Recording each pater	nt assignment per			
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Code (5) Code (5)	146	740	246		Filing a submission af	ter final rejection			[]
103 18 203 9 Claims in excess of 20					(37 CFR § 1.129(a))				
102 84 202 42 Independent claims in excess of 3	149	740	249		For each additional in examined (37 CFR §				
104 280 204 140 Multiple Dependent claim, if not paid	179	740	270		Request for Continuer		= \		
109 84 209 42 **Reissue independent claims over original patent	169		279 169	• • •	·		-)		
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110 18 210 9 **Reissue claims in excess of 20 and over original patent		Other fee (specify)						J	
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Name (Print/Type) William W. Scham		Registration Ntomey/Agen		3	9,018	Telephone	(714)	557 (-3800

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